

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

MONTHLY ESTIMATE

FOR THE MONTH OF OCTOBER, 2010

Date: October 27, 2010

CONTRACTOR: STAN'S CONTRACTING, INC.

ADDRESS: 99-1280 WAIUA PLACE

Contract No. 59213

City, State ZIP: AIEA, HI 96701

DAGS Job No. 61-10-0611

PROJECT TITLE: HILO STATE OFFICE BUILDING, INTERIOR RENOVATION, PHASE 1, HILO, HAWAII

CONTRACT

Basic Contract Amount \$ 856,700.00

FOR INSPECTION BRANCH USE

☐ SUBMITTAL REGISTER ☐ COMMENCEMENT REQUIREMENTS

DUE MONTHLY:

☐ PROJECT SCHEDULE - INITIAL & ONGOING

☐ DAILY REPORTS

☐ PAYROLL AFFIDAVITS

MONTHLY ESTIMATE CHECKLIST

☐ CONTRACT NUMBER

☐ PROJECT NAME & LOCATION

☐ ALL SIGNATURES

CHANGE ORDERS

Total \$ 23,316.00

Adjusted Contract Amount \$ 880,016.00

WORK ACCOMPLISHED

Basic Contract

Change Order

Total

Completed to Date	70.38%	\$ <u>602,981.00</u>	100.00%	\$ <u>23,316.00</u>	\$ <u>626,297.00</u>
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Retained	REDUCED <input type="checkbox"/>	\$ <u>30,149.00</u>	\$ <u>1,165.00</u>	\$ <u>31,314.00</u>
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Amount Subject to Payment	\$ <u>572,832.00</u>	\$ <u>22,151.00</u>	\$ <u>594,983.00</u>
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Payments to Date	\$ <u>339,797.00</u>	\$ <u>22,151.00</u>	\$ <u>361,948.00</u>
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Payments Now Due	\$ <u>233,035.00</u>	\$ <u>-</u>	\$ <u>233,035.00</u>
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Payment No. FINAL ☐ 4

Remarks:

1. Computed and Checked by:

2. I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request.

3. Recommended: [Signature] Project Inspector or Engineer

Date:

STAN'S CONTRACTING, INC.

Name of Contractor

4. Recommended: [Signature] Civil Engineer/Architect

Date:

5. Approved: [Signature] Branch Chief or District Engineer

Date:

By signature / Title:

Date:

State Public Works

ie work performed.

State Public Works Administrator

Date:

NOV 12 2010

For the Month of: OCTOBER, 2010

CLOSED	PRIME CONTRACTOR	TRADE	LICENSE NO.	BASIC CONTRACT AMOUNT	COMPL. TO DATE	% CMPL	RETN %	CONTRACT AMOUNT RETAINED
		STAN'S CONTRACTING, INC	General Contractor	BC-3637	\$88,300	\$48,565	55.00%	5%

BASIC CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)

NOTE:
Columnar totals shall be equal in dollar value to that on
the Monthly Estimate Sheet

CHANGE ORDER - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

For the Month of: OCTOBER, 2010

CONTRACTOR: STAN'S CONTRACTING, INC. Contract No.: 59213
PROJECT TITLE: HILO STATE OFFICE BUILDING, INTERIOR RENOVATI DAGS Job No.: 61-10-0611

CLOSED	PRIME CONTRACTOR	TRADE	LICENSE NO.	CHANGE ORDER AMOUNT	COMPL. TO DATE	% Cmpl	RETN %	CHANGE ORDER AMOUNT RETAINED
	STAN'S CONTRACTING, INC	General Contractor	BC-3637	\$4,684	\$4,684	100.00%	5%	\$234

	SUBCONTRACTOR	TRADE	LICENSE NO.	CHANGE ORDER SUB AMOUNT	COMPL TO DATE	% Cmpl	RETN %	CHANGE ORDER SUB AMOUNT RETAINED
	UNITEK INSULATION	ASBESTOS	C-11851	\$18,632	\$18,632	100.00%	5%	\$931
				\$0	\$0	#DIV/0!	5%	\$0
						#DIV/0!	5%	\$0
						#DIV/0!	5%	\$0
						#DIV/0!	5%	\$0
						#DIV/0!	5%	\$0
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						#DIV/0!	5%	\$0
						#DIV/0!	5%	\$0
						#DIV/0!	5%	\$0
	Total Retained from Subs							\$931 B

CHANGE ORDER CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)	\$1,165
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I certify that the above retentions are correct for this request.

STAN'S CONTRACTING, INC.

Name of Contractor

By Signature

Date _____

NOTE:
Columnar totals shall be equal in dollar value to that on
the Monthly Estimate Sheet

Checked/Verified by:

Initial - Project Inspector or Engineer

STATE OF HAWAII
DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES
DIVISION OF PUBLIC WORKS
Monthly Payment Slip

RECEIVED - DAGS
DIV. OF PUBLIC WORKS

2010 NOV 29 PM 1:25

PAYMENT NO.: 4

PROJECT TITLE: HILO STATE OFFICE BUILDING - INTERIOR RENOVATION, PHASE 1

HAWAII DISTRICT OFFICE
DIV. OF PUBLIC WORKS
D.A.G.S.

BILLING MONTH: October-10

DAGS JOB NO.: 6 1-10-0611

CONTRACT NO.: 59213

CONTRACTOR: STAN'S CONTRACTING INC.

VENDOR CODE:

Original Contract Payment Suffix:

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B08-448M	\$245,300.00	\$12,265.00	\$233,035.00
Totals:		\$245,300.00	\$12,265.00	\$233,035.00

Change Order Payment Suffix:

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
Totals:				

Grand Total:	\$245,300.00	\$12,265.00	\$233,035.00
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Lloyd Ogata
Verified By

11/12/2010
DATE

(This Section for Administrative Services Office Use Only)

Vendor Code

Cost Code 3A1

Voucher No.

Verified By

11141N43

ms 11/18/10